

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Pacific Life Insurance Company Political Action Committee

ADDRESS (number and street)

700 Newport Center Drive

☐Check if different
than previously
reported. (ACC)

Newport Beach

CA

92660

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00068528

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☒Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

11

01

2007

through

11

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Robert Haskell

Signature of Treasurer

Electronically Filed by Robert Haskell

Date

12

11

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Pacific Life Insurance Company Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	1	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		20761.19
(b) Cash on Hand at Beginning of Reporting Period	66294.45	
(c) Total Receipts (from Line 19)	17211.98	201245.24
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	83506.43	222006.43
7. Total Disbursements (from Line 31)	6500.00	145000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	77006.43	77006.43
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Pacific Life Insurance Company Political Action Committee

Report Covering the Period:

From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	16617.65	149845.95
(i) Itemized (use Schedule A)		
(ii) Unitemized	594.33	51399.29
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	17211.98	201245.24
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	17211.98	201245.24
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	17211.98	201245.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17211.98	201245.24

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		6500.00	145000.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		6500.00	145000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		6500.00	145000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	17211.98	201245.24
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17211.98	201245.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 92

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) MS. JUNE G ARCE Mailing Address 20050 EMERALD MEADOW DR City WALNUT State CA Zip Code 91789 FEC ID number of contributing federal political committee. C Name of Employer Pacific Life Occupation DIR MKTG COMPLIANCE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR10362101438 Amount of Each Receipt this Period 50.00 P/R Deduction (\$50.00 Monthly)
B. Full Name (Last, First, Middle Initial) MS. JULIE E TRASK Mailing Address 181 S CRAIG DR City ORANGE State CA Zip Code 92869 FEC ID number of contributing federal political committee. C Name of Employer Pacific Life Occupation MGR CUSTOMER SVC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR10362121438 Amount of Each Receipt this Period 40.00 P/R Deduction (\$40.00 Monthly)
C. Full Name (Last, First, Middle Initial) MR. DANIEL F BASS Mailing Address 531 PROMONTORY DR E City NEWPORT BEACH State CA Zip Code 92660 FEC ID number of contributing federal political committee. C Name of Employer Pacific Life Occupation VP REINSURANCE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR10362151438 Amount of Each Receipt this Period 0.00 P/R Deduction (\$0.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MS. LYNETTE G BONES

Mailing Address 23955 WARSAW ST

City State Zip Code
MISSION VIEJO CA 92691

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
MGR RET ANN BUS DEV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362221438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MR. ANTHONY J BONNO

Mailing Address 61 VERNAL SPG

City State Zip Code
IRVINE CA 92603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR VP HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362231438

Amount of Each Receipt this Period

400.00

P/R Deduction (\$400.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MR. ALAN H BROWN

Mailing Address 505 13TH ST

City State Zip Code
HUNTINGTON BEACH CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP INFO TECH OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362251438

Amount of Each Receipt this Period

70.00

P/R Deduction (\$70.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

495.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. KATHLEEN N WILSON

Mailing Address 2525 JUANITA WAY

City State Zip Code
LAGUNA BEACH CA 92651

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR PROJECT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362271438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. DEWEY P BUSHAW

Mailing Address 29132 ALFIERI ST

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR VP AMF CHF MKTG OFCR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1756.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362301438

Amount of Each Receipt this Period

167.00

P/R Deduction (\$167.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL J BUSSARD

Mailing Address 5256 LYSANDER LN

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362311438

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

280.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. EDWARD R BYRD
Mailing Address 17520 PAGE CT

City State Zip Code
YORBA LINDA CA 92886

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR VP & CHF ACTG OFCR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1180.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362321438

Amount of Each Receipt this Period

110.00

P/R Deduction (\$110.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. JOHN E CARLSON
Mailing Address 55 GILLMAN ST

City State Zip Code
IRVINE CA 92612

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP INS CNSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362351438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. DAVID R CARMICHAEL
Mailing Address 1525 SERENADE TER

City State Zip Code
CORONA DEL MAR CA 92625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR VP GEN COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362361438

Amount of Each Receipt this Period

416.00

P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

551.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JOSEPH E CELENTANO

Mailing Address 26661 CAMPESINO

City State Zip Code
MISSION VIEJO CA 92691

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR VP PROD MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362381438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. SHARON A CHEEVER

Mailing Address 33512 VALLE RD

City State Zip Code
SN JUAN CAPISTRANO CA 92675

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP & INVEST COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1055.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362401438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. LAURIE A CHURCH

Mailing Address 21851 NEWLAND ST SPC 246

City State Zip Code
HUNTINGTON BEACH CA 92646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
MGR STRUCT STTLMENTS OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362421438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 92

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. BERNADINE E CHWALEK

Mailing Address 33741 SHACKLETON ISLE

City State Zip Code
DANA POINT CA 92629

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP INVEST CNSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362431438

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. JACK D CLABOUGH

Mailing Address 1410 TANGLEWOOD DR

City State Zip Code
CORONA CA 92882

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP & CHIEF LIFE UNDERWRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362451438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. KATHLEEN A CLUNE

Mailing Address 858 S BLUEBIRD CIR

City State Zip Code
ANAHEIM CA 92807

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP ASST TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362461438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. GAIL C MOSCOSO
Mailing Address 31558 WEST NINE DR

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP CLIENT SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362481438

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. CHRISTINE L KELLERMAN
Mailing Address 26571 VIA CALIFORNIA

City State Zip Code
CAPISTRANO BEACH CA 92624

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
APPLIC DEV MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.63

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362491438

Amount of Each Receipt this Period

33.33

P/R Deduction (\$33.33 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. BRENDAN L COLLINS
Mailing Address 25551 ORCHARD RIM LN

City State Zip Code
LAKE FOREST CA 92630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP PORT MGMT, IG TRADING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362501438

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

128.33

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MR. DENNIS M CORBETT

Mailing Address 15136 TOURAINE WAY

City State Zip Code
IRVINE CA 92604

FEC ID number of contributing federal political committee.

C

Name of Employer
Pacific LifeOccupation
VP TAX COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1055.00

Date of Receipt

M M / D D / Y Y Y Y Y
/ / / / /

Transaction ID: PR10362511438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MR. CAMERON COSGROVE

Mailing Address 20455 VIA BURGOS

City State Zip Code
YORBA LINDA CA 92887

FEC ID number of contributing federal political committee.

C

Name of Employer
Pacific LifeOccupation
VP LIFE CHIEF INFO OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.00

Date of Receipt

M M / D D / Y Y Y Y Y
/ / / / /

Transaction ID: PR10362531438

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MR. DANIEL C CRAIN

Mailing Address 36 WINTERGREEN

City State Zip Code
IRVINE CA 92604

FEC ID number of contributing federal political committee.

C

Name of Employer
Pacific LifeOccupation
MGR PROD COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
/ / / / /

Transaction ID: PR10362541438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. PAUL J CROXTON
Mailing Address 30132 HILLSIDE TER

City State Zip Code
SN JUAN CAPISTRANO CA 92675

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FVP FIELD WHOLESALING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362551438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. DEBRA CUNNINGHAM HONERKAMP
Mailing Address 2712 LIGHTHOUSE LN

City State Zip Code
CORONA DEL MAR CA 92625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP RE ASSET MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362561438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL R CURRY
Mailing Address 12162 WICKLOW LN

City State Zip Code
NAPLES FL 34120

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FVP FIELD WHOLESALING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362571438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. STEPHANIE J CURRY

Mailing Address PO BOX 15358

City State Zip Code
IRVINE CA 92623

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP ADVANCED SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362591438

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. DIANE W DALES

Mailing Address 28 CLERMONT

City State Zip Code
NEWPORT COAST CA 92657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP CREDIT ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362601438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. LINDA D LARSON

Mailing Address 8315 ROAD R NW

City State Zip Code
QUINCY WA 98848

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP IND COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362621438

Amount of Each Receipt this Period

90.00

P/R Deduction (\$90.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. EMILE C DUROCHER

Mailing Address 9740 E GRANITE PEAK TRL

City State Zip Code
SCOTTSDALE AZ 85262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FIELD VP MRKTNG AFFILIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362661438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. NANCY E ENOMOTO

Mailing Address 2001 BARRANCA

City State Zip Code
NEWPORT BEACH CA 92660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIR IMD OPS RSK MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362691438

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. MARK R FALK

Mailing Address 64 SUMMERSTONE

City State Zip Code
IRVINE CA 92614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP STRATEGIC PROGRAMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362711438

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MR. PETER S FIEK

Mailing Address 22 ARCADE

City State Zip Code
 IRVINE CA 92603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP PORTFOLIO MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362771438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MR. DAVID R FINEAR

Mailing Address 718 K THANGA DR

City State Zip Code
 CORONA DEL MAR CA 92625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP RE INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362781438

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MR. MARTIN J FLEISCHMAN

Mailing Address 2915 CALLE GUADALAJARA

City State Zip Code
 SAN CLEMENTE CA 92673

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP SEPARATE ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362791438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS. MARTHA A GATES

Mailing Address 31411 MONTEREY ST

City

LAGUNA BEACH

State

CA

Zip Code

92651

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation

SR VP OPERATIONS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362861438

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

MR. FRANK J GOETZ

Mailing Address 7 SOVENTE

City

IRVINE

State

CA

Zip Code

92606

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation

AVP NEW BUSINESS SVCS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

746.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362901438

Amount of Each Receipt this Period

70.00

P/R Deduction (\$70.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

MR. KEVIN P GOODMAN

Mailing Address 310 ALISO AVE

City

NEWPORT BEACH

State

CA

Zip Code

92663

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation

ACCUM PROD CONS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362911438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. MILDA C GOODMAN

Mailing Address 310 ALISO AVE

City State Zip Code
NEWPORT BEACH CA 92663

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP ADV & PUB RLTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362921438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. LORENE C GORDON

Mailing Address 37 LANTANA

City State Zip Code
ALISO VIEJO CA 92656

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362931438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. C MARLA GRAHAM

Mailing Address 23672 BRASILIA ST

City State Zip Code
MISSION VIEJO CA 92691

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
MGR NEXT WAVE PMO/BA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10362941438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) MR. WILLIAM C GREEN Mailing Address 12889 RALSTON CIR City State Zip Code SAN DIEGO CA 92130 FEC ID number of contributing federal political committee. C Name of Employer Pacific Life Occupation SR CASH COLLTRL COORD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR10362951438 Amount of Each Receipt this Period 25.00 P/R Deduction (\$25.00 Monthly)
B. Full Name (Last, First, Middle Initial) MR. ADRIAN S GRIGGS Mailing Address 8766 CANARY AVE City State Zip Code FOUNTAIN VALLEY CA 92708 FEC ID number of contributing federal political committee. C Name of Employer Pacific Life Occupation VP FINANCE & COMPLIANCE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR10362961438 Amount of Each Receipt this Period 50.00 P/R Deduction (\$50.00 Monthly)
C. Full Name (Last, First, Middle Initial) MS. IRENE L HALLETT Mailing Address 60 PALATINE APT 223 City State Zip Code IRVINE CA 92612 FEC ID number of contributing federal political committee. C Name of Employer Pacific Life Occupation NATL ACCOUNTS SUPR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR10362991438 Amount of Each Receipt this Period 30.00 P/R Deduction (\$30.00 Monthly)
SUBTOTAL of Receipts This Page (optional) ▶		105.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. BRENDA K HARDWIG
Mailing Address 13112 EARLHAM ST

City State Zip Code
SANTA ANA CA 92705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
COMMUNITY RELTNS COORD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363031438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. ROBERT G HASKELL
Mailing Address 31735 SEACLIFF DR

City State Zip Code
LAGUNA BEACH CA 92651

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR VP PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363061438

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. DALE E HAWLEY
Mailing Address 1137 SUNSET CLIFFS BLVD

City State Zip Code
SAN DIEGO CA 92107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP INVEST CNSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

814.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363071438

Amount of Each Receipt this Period

74.00

P/R Deduction (\$74.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

530.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. ROBERT J HEMSTEAD
Mailing Address 310 E MCCOY LN

City State Zip Code
SANTA MARIA CA 93455

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP & VALUATION ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363101438

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. KEVIN A HENDRA
Mailing Address 58 VIAGGIO LN

City State Zip Code
FOOTHILL RANCH CA 92610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
CORP TAX DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363111438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM L HEZZELWOOD
Mailing Address 6700 CAMINO CRESTA

City State Zip Code
SAN CLEMENTE CA 92673

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP PROGRAM MGMT OFC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363131438

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MR. DAVID L HICKS

Mailing Address 25391 REMESA DR

City State Zip Code
MISSION VIEJO CA 92691

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR NETWORK MGMT ENGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363141438

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MR. HOWARD T HIRAKAWA

Mailing Address 23972 GOLDENEYE DR

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP INV ADVISOR OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363161438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MR. MARK W HOLMLUND

Mailing Address PO BOX 2108

City State Zip Code
RANCHO SANTA FE CA 92067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
EVP & CHIEF INVESTMENT OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363181438

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. MARYBETH HUGHES
Mailing Address 2283 WATERMAN WAY

City State Zip Code
COSTA MESA CA 92627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
CORP RISK MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363201438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. MARY K MCWARD
Mailing Address 2 GLASTONBURY PL

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363211438

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. CHRIS M JANOWIAK
Mailing Address 2056 COLUMBUS WAY

City State Zip Code
VISTA CA 92081

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIR CORP INTERNET STRATEGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363231438

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. CAROL A JENSEN
Mailing Address 8554 202ND STREET SW

City State Zip Code
EDMONDS WA 98026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIVISION VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363241438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. JEFF R JOHNSON
Mailing Address 1 SAND OAKS RD.

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363251438

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. KENT R JOHNSON
Mailing Address 25621 DEL NORTE

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP ACTUARIAL & REINS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363261438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. MARK J JOHNSON

Mailing Address 1812 LEADBURN RD

City State Zip Code
TOWSON MD 21204

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FVP FIELD WHOLESALING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363271438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. SCOTT E JOHNSON

Mailing Address 906 NEWTON LN

City State Zip Code
PLACENTIA CA 92870

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP CORP APPL SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363281438

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. LORI A JOHNSTONE

Mailing Address 27 GRAY STONE WAY

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP HIGH YIELD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363291438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. SUZANNE T KAMPA
Mailing Address 5531 STANFORD AVE

City State Zip Code
GARDEN GROVE CA 92845

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
IT AUDIT CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363321438

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. ANITA KARANJIA
Mailing Address 9 MONTECILO

City State Zip Code
FOOTHILL RANCH CA 92610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
BUSINESS CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363331438

Amount of Each Receipt this Period

65.00

P/R Deduction (\$65.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. BRIAN D KLEMENS
Mailing Address 24611 BENJAMIN CIR

City State Zip Code
DANA POINT CA 92629

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP CORPORATE CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

865.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363371438

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MS. JUNE E KNUTH

Mailing Address 30862 PASEO DEL NIGUEL

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP & INVEST COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363381438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MR. JOHN P KONTOS

Mailing Address 6307 CAMINO MARINERO

City State Zip Code
SAN CLEMENTE CA 92673

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP KEY ACCOUNT MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1210.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363421438

Amount of Each Receipt this Period

110.00

P/R Deduction (\$110.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MS. JODY L LINNEMAN

Mailing Address 262 S FAIRFIELD LN

City State Zip Code
ORANGE CA 92869

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP INVEST CNSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363451438

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 92

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. FLETCHER C LARSON

Mailing Address 709 AVENIDA MIROLA

City State Zip Code
PALOS VERDES EST CA 90274

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363471438

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. DAVID LAWS

Mailing Address 10935 E BERRY AVE

City State Zip Code
ENGLEWOOD CO 80111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363481438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. TERESA M LORD

Mailing Address 16432 CAMINO CANADA LN

City State Zip Code
HUNTINGTON BEACH CA 92649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363541438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. LAURENE E MAC ELWEE

Mailing Address 1033 SECRETARIAT CIR

City State Zip Code
COSTA MESA CA 92626

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP VARIABLE REG COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363561438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. STEPHANIE J BABKOW

Mailing Address 9901 OCEANCREST DR

City State Zip Code
HUNTINGTON BEACH CA 92646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP CLIENT SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363581438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. DESMOND G MARSH

Mailing Address 74 SETON RD

City State Zip Code
IRVINE CA 92612

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP ANNUITY APPLIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363591438

Amount of Each Receipt this Period

120.00

P/R Deduction (\$120.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MR. THOMAS J MAYS

Mailing Address 7406 PALOMA DR

City State Zip Code
HUNTINGTON BEACH CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP GOVT RELNS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363601438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MS. GAIL H MC INTOSH

Mailing Address 622 18TH ST

City State Zip Code
HUNTINGTON BEACH CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP INS CNSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363611438

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MS. JULIA C MC KINNEY

Mailing Address 207 N ELLERY DR

City State Zip Code
SAN PEDRO CA 90732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP INS CNSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363631438

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. MORGAN C MC KNIGHT
Mailing Address 1217 HIGHCREST DR

City State Zip Code
BURLESON TX 76028

FEC ID number of contributing federal political committee.

C

Name of Employer
Pacific LifeOccupation
APPLIC DEV CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
 M M / D D / Y Y Y Y Y

Transaction ID: PR10363641438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. HENRY M MC MILLAN
Mailing Address 4006 INLET ISLE DR

City State Zip Code
CORONA DEL MAR CA 92625

FEC ID number of contributing federal political committee.

C

Name of Employer
Pacific LifeOccupation
SR VP & CHIEF RISK OFCR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1062.50

Date of Receipt

M M / D D / Y Y Y Y Y
 M M / D D / Y Y Y Y Y

Transaction ID: PR10363661438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. JOHN E MILBERG
Mailing Address 33811 DONEGAL LN

City State Zip Code
SN JUAN CAPISTRANO CA 92675

FEC ID number of contributing federal political committee.

C

Name of Employer
Pacific LifeOccupation
SR VP RISK FIN & IM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1850.00

Date of Receipt

M M / D D / Y Y Y Y Y
 M M / D D / Y Y Y Y Y

Transaction ID: PR10363701438

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) MS. AUDREY L MILFS Mailing Address 26922 ROCKING HORSE LN City State Zip Code LAGUNA HILLS CA 92653 FEC ID number of contributing federal political committee. C Name of Employer Pacific Life Occupation VP & SECRETARY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR10363711438 Amount of Each Receipt this Period 250.00 P/R Deduction (\$250.00 Monthly)
B. Full Name (Last, First, Middle Initial) MR. JOSE T MISCOLTA Mailing Address 20 BRYCE CYN City State Zip Code ALISO VIEJO CA 92656 FEC ID number of contributing federal political committee. C Name of Employer Pacific Life Occupation AVP PROD & PORT MKTG Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 655.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR10363751438 Amount of Each Receipt this Period 65.00 P/R Deduction (\$65.00 Monthly)
C. Full Name (Last, First, Middle Initial) MS. ELIZABETH A MOORE Mailing Address 6412 N 159TH ST City State Zip Code OMAHA NE 68116 FEC ID number of contributing federal political committee. C Name of Employer Pacific Life Occupation SYSTEMS ANALYSIS CONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 495.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR10363761438 Amount of Each Receipt this Period 45.00 P/R Deduction (\$45.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JAMES T MORRIS

Mailing Address 29022 PINTAIL CIR

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363791438

Amount of Each Receipt this Period

416.00

P/R Deduction (\$416.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JOHN C MULVIHILL

Mailing Address 27822 HOMESTEAD RD

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP RE ASSET MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363801438

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. MICHELE A MYSKA

Mailing Address 26206 SANZ AVE

City State Zip Code
MISSION VIEJO CA 92691

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
COMMUNITY RELTNS DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363841438

Amount of Each Receipt this Period

10.00

P/R Deduction (\$10.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

601.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. DARAGH M O'SULLIVAN
Mailing Address 177 22ND ST APT 14

City State Zip Code
COSTA MESA CA 92627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP PRODUCT DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363901438

Amount of Each Receipt this Period

200.00

P/R Deduction (\$200.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. RICHARD P OLSON
Mailing Address 24852 CAMBERWELL ST

City State Zip Code
LAGUNA HILLS CA 92653

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIR SECURITY SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363931438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. HEATHER A PAIGE
Mailing Address 29352 BOBOLINK DR

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP IMD OPS & COMPL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10363961438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MS. JOYCE J PEAD

Mailing Address 25 SUNRISE

City State Zip Code
 IRVINE CA 92603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP HR CONSULTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364001438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MS. ALYCE PETERSON

Mailing Address 2908 VIA HIDALGO

City State Zip Code
 SAN CLEMENTE CA 92673

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP MARKETING SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364021438

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MR. B P PILLION

Mailing Address 915 STOKES RD

City State Zip Code
 VILLANOVA PA 19085

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364041438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. YVES F PINKOWITZ
Mailing Address 20541 VIA EL TAJO

City State Zip Code
YORBA LINDA CA 92887

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP CORP AUDIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364051438

Amount of Each Receipt this Period

37.00

P/R Deduction (\$37.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. THEODORE A PREMIER
Mailing Address 20 MOLINO

City State Zip Code
NEWPORT BEACH CA 92660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP COMM MORT PROD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364081438

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH A PUM
Mailing Address 33 BOLERO

City State Zip Code
MISSION VIEJO CA 92692

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
INTERNAL AUDIT DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364091438

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

222.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. JAMES R RICE
Mailing Address 11 STILLWATER

City State Zip Code
IRVINE CA 92603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP M FINANCIAL DISTRIBUTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1210.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364141438

Amount of Each Receipt this Period

110.00

P/R Deduction (\$110.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. BIRGIT RICKETTS
Mailing Address 1534 DOGWOOD WAY

City State Zip Code
NORCO CA 92860

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR ADV COMPL ANA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364151438

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. GERALD W ROBINSON
Mailing Address 38347 N 104TH PL

City State Zip Code
SCOTTSDALE AZ 85262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
EXEC VP ANNUITIES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3225.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364181438

Amount of Each Receipt this Period

300.00

P/R Deduction (\$300.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 39 / 92

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. THOMAS M RONCE

Mailing Address 19 GLEN ELLEN

City State Zip Code
IRVINE CA 92602

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP & TAX COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364201438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. ROBERT D RUSSELL

Mailing Address 51202 EASTCHURCH

City State Zip Code
CHAPEL HILL NC 27517

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP RE INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364231438

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. RICHARD J SCHINDLER

Mailing Address 28792 APPLETREE

City State Zip Code
MISSION VIEJO CA 92692

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR VP LIFE CHF MKTG OFCR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364261438

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 92

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MS. PEGGY L SCHMIDT

Mailing Address 25 RECODO

City State Zip Code
 IRVINE CA 92620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP PROGRAM MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364271438

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MS. KIMBERLY K SCHULTZ

Mailing Address 28392 CALLE PINON

City State Zip Code
 SN JUAN CAPISTRANO CA 92675

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364301438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MS. CATHY L SCHWARTZ

Mailing Address 87 PELICAN CT

City State Zip Code
 NEWPORT BEACH CA 92660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP CREDIT ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364311438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. ALAN L SCHWITZGEBEL

Mailing Address 18612 MORONGO ST

City State Zip Code
FOUNTAIN VALLEY CA 92708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR HR GENERALIST COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364321438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. SONJA V SCOTT

Mailing Address 30 CANYONWOOD

City State Zip Code
IRVINE CA 92620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP COMPENSATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364331438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. BRADLEY W SHERRELL

Mailing Address 2315 VIA ZAFIRO

City State Zip Code
SAN CLEMENTE CA 92673

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP INFO TECHNOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364351438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. PENNY S SPARKS

Mailing Address 1661 UTAH CIR

City State Zip Code
COSTA MESA CA 92626

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIR PORTFOLIO OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364441438

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM E STODDART

Mailing Address 2413 W 123RD TER

City State Zip Code
LEAWOOD KS 66209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364471438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. ROBERT S STREVELL

Mailing Address 1213 25TH ST

City State Zip Code
GALVESTON TX 77550

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364491438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MS. CAROL R SUDBECK

Mailing Address 11 SOMMET

City State Zip Code
 NEWPORT COAST CA 92657

FEC ID number of contributing federal political committee.

C

Name of Employer
Pacific LifeOccupation
VP TALENT ACQ & DEV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
 . . / . . /

Transaction ID: PR10364501438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MR. THOMAS C SUTTON

Mailing Address 111 SHORECLIFF RD

City State Zip Code
 CORONA DEL MAR CA 92625

FEC ID number of contributing federal political committee.

C

Name of Employer
Pacific LifeOccupation
CHRMN & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.96

Date of Receipt

M M / D D / Y Y Y Y Y
 . . / . . /

Transaction ID: PR10364521438

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MS. ALICE P TERLECKY

Mailing Address 2130 CAMINO LAUREL

City State Zip Code
 SAN CLEMENTE CA 92673

FEC ID number of contributing federal political committee.

C

Name of Employer
Pacific LifeOccupation
AVP NEW BUSINESS SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
 . . / . . /

Transaction ID: PR10364571438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MR. JOHN G TORELL

Mailing Address 355 S LORETTA DR

City State Zip Code
 ORANGE CA 92869

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP ACCTG & RPTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364581438

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MR. STEPHEN J TORETTO

Mailing Address 22862 ORENSE

City State Zip Code
 MISSION VIEJO CA 92691

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP & INSURANCE COUNS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364591438

Amount of Each Receipt this Period

55.00

P/R Deduction (\$55.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MR. KHANH T TRAN

Mailing Address 47 VERNAL SPG

City State Zip Code
 IRVINE CA 92603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
EXEC VP CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364601438

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

SUBTOTAL of Receipts This Page (optional)

546.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. SUSAN L TULLY

Mailing Address 6929 N HAYDEN RD PMB 157

City State Zip Code
SCOTTSDALE AZ 85250

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364611438

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. EDDIE D TUNG

Mailing Address PO BOX 10386

City State Zip Code
NEWPORT BEACH CA 92658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP REGULATORY PROD ACCTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364621438

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. CATHRYN L VAN WEY

Mailing Address 41974 CARSON CT

City State Zip Code
MURRIETA CA 92562

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIR NATL ACCTS & KEY ACCT SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364631438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. MELANIE G WAGNER
Mailing Address 1842 MOORPARK DR

City State Zip Code
BREA CA 92821

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIR HR & PR SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364641438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. JOHN M WALDECK
Mailing Address 67 LAURELHURST DR

City State Zip Code
LADERA RANCH CA 92694

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP RE UNDERWRITING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1055.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364651438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. DARLENE A WALLACE
Mailing Address PO BOX 2462

City State Zip Code
NEWPORT BEACH CA 92659

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR SYSTEMS ANA (LD)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364661438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. NANCY A WEBB

Mailing Address 36 BLACK HAWK

City State Zip Code
IRVINE CA 92603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364701438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. NAOMI D WHEELER

Mailing Address 1827 MAIN ST

City State Zip Code
HUNTINGTON BEACH CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP FINANCIAL ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364731438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. JOHN WHITE

Mailing Address 32122 VIA CARLOS

City State Zip Code
SN JUAN CAPISTRANO CA 92675

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP INTERNAL WHLSLNG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364741438

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MS. KAREN S WILEY

Mailing Address 2921 PLAYER LANE

City State Zip Code
TUSTIN CA 92782

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIR COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364751438

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MR. ALAN D WUEST

Mailing Address 32 COLORIDO

City State Zip Code
RCHO STA MARGARITA CA 92688

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIR OPS SUPPORT SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364801438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MS. ROBIN S YONIS

Mailing Address 8 CASTLEBAR

City State Zip Code
IRVINE CA 92618

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP VAR REGULATORY COMPL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364821438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MS. MARIA ZAMBELLI-DOUGHERTY

Mailing Address 525 LOMBARDY RD

City State Zip Code
DREXEL HILL PA 19026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SUPR OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10364831438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MR. MICHAEL J WAUTERS

Mailing Address 2942 COPA DE ORO DR

City State Zip Code
LOS ALAMITOS CA 90720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP FIN REPTG & PLNG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365121438

Amount of Each Receipt this Period

55.00

P/R Deduction (\$55.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MR. MICHAEL A BELL

Mailing Address 2 PRECIPICE

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
EVP LIFE INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365141438

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MR. PAUL V LIGEROS

Mailing Address 44 RABANO

City State Zip Code
 RCHO STA MARGARITA CA 92688

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
PROD & COMPETITION CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365201438

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MR. REED J LLOYD

Mailing Address 6 SANDERLING LN

City State Zip Code
 ALISO VIEJO CA 92656

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP ADVANCED MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365211438

Amount of Each Receipt this Period

65.00

P/R Deduction (\$65.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MR. REX A OLSON

Mailing Address 1963 PORT LAURENT PL

City State Zip Code
 NEWPORT BEACH CA 92660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR MANAGING DIR, PAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365221438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MR. SAMUEL TANG

Mailing Address 9 KEMPTON LN

City State Zip Code
 LADERA RANCH CA 92694

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
PRINCIPAL PAC TRIGUARD COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365231438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MS. CAROLYN DEAN

Mailing Address PO BOX 3051

City State Zip Code
 DANA POINT CA 92629

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIR FINANCIAL RPTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365341438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MS. ANGELA D HARRELSON

Mailing Address 286 VIRGINIA PL

City State Zip Code
 COSTA MESA CA 92627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
BUS SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365401438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MS. CAROL E RUMSEY

Mailing Address 25221 SPINDLEWOOD

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
COMPLIANCE MGR (FUNDS)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365451438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MR. PHILIP A TEETER

Mailing Address 376 MYRTLE ST

City State Zip Code
LAGUNA BEACH CA 92651

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP ANN TECHNOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365471438

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MR. RICHARD BAUDOUIN

Mailing Address 12 INDIAN SPRING RD

City State Zip Code
NORWALK CT 06853

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
MNG DIR & CPTL MKTS PRFTL MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365491438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. BENJAMIN JUNG
Mailing Address 115 VIA KORON

City State Zip Code
NEWPORT BEACH CA 92663

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
MANAGING DIR & COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365511438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. RICHARD G CHERNEY
Mailing Address 27835 HOMESTEAD RD

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
EXEC VP GLOBAL MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365541438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. KAREN S WALL
Mailing Address 1811 RIVERFORD RD

City State Zip Code
TUSTIN CA 92780

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
APPLIC DEV DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365581438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. TENNYSON S OYLER

Mailing Address 112 CLEARBROOK

City State Zip Code
IRVINE CA 92614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
PUBLIC AFFAIRS MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365611438

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM D COTTON

Mailing Address 703 KAHN PL

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365621438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. ROBERT C HSU

Mailing Address 1121 EBBTIDE RD

City State Zip Code
CORONA DEL MAR CA 92625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR VP ANN ADMIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1415.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365661438

Amount of Each Receipt this Period

130.00

P/R Deduction (\$130.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. VALERIE MORRIS
Mailing Address 48 W YALE LOOP

City State Zip Code
IRVINE CA 92604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP HR PRGMS & SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365681438

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. PATRICIA S DOUGLASS
Mailing Address 640 SAINT JAMES RD

City State Zip Code
NEWPORT BEACH CA 92663

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP GOVT RELNS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2335.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365731438

Amount of Each Receipt this Period

215.00

P/R Deduction (\$215.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. NORM AKHAMLICH
Mailing Address 24321 AUGUSTIN ST

City State Zip Code
MISSION VIEJO CA 92691

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
MGR BUILDING OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365751438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) MS. JEANINE M BASHORE			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address 2021 DEBORAH LN			Transaction ID: PR10365771438	
City State Zip Code NEWPORT BEACH CA 92660		Amount of Each Receipt this Period <div>22.00</div>		
FEC ID number of contributing federal political committee. <div>C</div>				
Name of Employer Pacific Life		Occupation SR HR COORDINATOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>221.00</div>		
B. Full Name (Last, First, Middle Initial) MR. WILLIAM D BURKE			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address 2216 NELDA WAY			Transaction ID: PR10365781438	
City State Zip Code ALAMO CA 94507		Amount of Each Receipt this Period <div>100.00</div>		
FEC ID number of contributing federal political committee. <div>C</div>				
Name of Employer Pacific Life		Occupation REGIONAL VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>1100.00</div>		
C. Full Name (Last, First, Middle Initial) MR. DAMIAN DELL'OSO			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address 1A DERICKSON DR			Transaction ID: PR10365811438	
City State Zip Code WILMINGTON DE 19808		Amount of Each Receipt this Period <div>0.00</div>		
FEC ID number of contributing federal political committee. <div>C</div>				
Name of Employer Pacific Life		Occupation SR WHOLESALER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>290.00</div>		

P/R Deduction (\$22.00 Monthly)

P/R Deduction (\$100.00 Monthly)

P/R Deduction (\$0.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

122.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. DONALD M DOWNING

Mailing Address 995 QUIVERA ST

City State Zip Code
LAGUNA BEACH CA 92651

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FVP M MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1770.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365831438

Amount of Each Receipt this Period

165.00

P/R Deduction (\$165.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. SILAS K DUNN

Mailing Address 14 ELDERWOOD

City State Zip Code
IRVINE CA 92614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP PSD COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365841438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. RODERICK P HANSEN

Mailing Address 21612 MARIGOT DR

City State Zip Code
BOCA RATON FL 33428

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365851438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. CHARLES W HARVEY

Mailing Address 411 1/2 POINSETTIA AVE

City State Zip Code
CORONA DEL MAR CA 92625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR SYSTEMS ADMINR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365861438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. CHRISTINA Q HE

Mailing Address 16625 SONORA STREET

City State Zip Code
TUSTIN CA 92782

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP ASSET/LIAB STRAT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365871438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. RONALD S KLINGE

Mailing Address 995 QUIVERA ST

City State Zip Code
LAGUNA BEACH CA 92651

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR PRODUCT ANA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365921438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ERIC B MILLS

Mailing Address 25202 LA ESTRADA DR

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP ADVANCED DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365951438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JOHN F O'DONNELL

Mailing Address 30 BRIAN RD

City State Zip Code
BRIDGEWATER MA 02324

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIVISION VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365961438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. EVAN P OHS

Mailing Address 8124 WESTLAWN AVE

City State Zip Code
LOS ANGELES CA 90045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FIELD VICE PRES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365971438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. JULIET A PINKERTON

Mailing Address 22 N PALMIERA CIR

City State Zip Code
THE WOODLANDS TX 77382

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2090.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10365991438

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. PHILLIP L SALEMNO

Mailing Address 47 BETSY LN

City State Zip Code
AMBLER PA 19002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366031438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. RICHARD A TAUBE

Mailing Address 24081 NUTHATCH LN

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP PRODUCT MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366041438

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. TRAVIS R MC KAY
Mailing Address 24719 JOLEE CT

City State Zip Code
PLAINFIELD IL 60544

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366061438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. JOANN ROGERS
Mailing Address 909 DREXEL AVE

City State Zip Code
DREXEL HILL PA 19026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SUPR OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366081438

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. KATHARINE B YOUNG
Mailing Address 18647 SANTA ISADORA ST

City State Zip Code
FOUNTAIN VALLEY CA 92708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP VALUATION & RPTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366101438

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. DALE W PATRICK
Mailing Address 11975 LAMBERT

City State Zip Code
TUSTIN CA 92782

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP PORT MGMT, IG TRADING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366141438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER VAN MIERLO
Mailing Address 400 EL VUELO

City State Zip Code
SAN CLEMENTE CA 92672

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP NATL ACCOUNTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366151438

Amount of Each Receipt this Period

55.00

P/R Deduction (\$55.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. DOUGLAS J URATA
Mailing Address 28202 MILLWOOD RD

City State Zip Code
TRABUCO CANYON CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR PROJECT COORD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366161438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL S ROBB
Mailing Address 27481 VANTAGE CIRCLE

City State Zip Code
SN JUAN CAPISTRANO CA 92675

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
EXEC VP RE INVEST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366191438

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. JANE K WONG-HSU
Mailing Address 1121 EBBTIDE RD

City State Zip Code
CORONA DEL MAR CA 92625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP QUANTITATIVE STRAT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366211438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM B ARMSTRONG
Mailing Address 5322 LAIRD RD

City State Zip Code
LOOMIS CA 95650

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FVP FIELD WHOLESALING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366221438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. HEATHER M BETONTE

Mailing Address 295 SANTA BARBARA

City State Zip Code
IRVINE CA 92606

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SUPR FINANCIAL ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366231438

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL P BORGATTI

Mailing Address 978 BALD CYPRESS DR

City State Zip Code
MANDEVILLE LA 70448

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366241438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. RAYMOND S GETTINS

Mailing Address 218 WORTHINGTON AVE

City State Zip Code
WYOMING OH 45215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366251438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. LISA M HENSGEN

Mailing Address 7900 INNISBROOK CT

City State Zip Code
 PROSPECT KY 40059

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366261438

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. RICHARD M WILKES

Mailing Address 7124 HAWKSBEARD DR

City State Zip Code
 WESTERVILLE OH 43082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366271438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. RICHARD S BANNO

Mailing Address 26666 WHITE OAKS DR

City State Zip Code
 LAGUNA HILLS CA 92653

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP CAPITAL MKTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366281438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. THOMAS C BILELLO

Mailing Address 17812 BIGELOW PARK

City State Zip Code
TUSTIN CA 92780

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP IND COMP & TRANS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366291438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. STEPHEN M BOLLINGER

Mailing Address 17345 FLAME TREE CIR

City State Zip Code
FOUNTAIN VALLEY CA 92708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP E-COMMERCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366301438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. MARY ANN BROWN

Mailing Address 288 CHIQUITA ST

City State Zip Code
LAGUNA BEACH CA 92651

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR VP CORP DEVELPMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366311438

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

SUBTOTAL of Receipts This Page (optional)

471.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. LORI K CARRASCO
Mailing Address 2742 PORTOLA DR

City State Zip Code
COSTA MESA CA 92626

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR PARALEGAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366321438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. EDWARD T CREECH
Mailing Address 168 HIGH HILLS DR

City State Zip Code
MOORESVILLE NC 28117

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366331438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. JEFFREY D DZIADZIOLA
Mailing Address 2917 CHALFONT LN

City State Zip Code
PLANO TX 75023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366341438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MR. SIMON S FENG

Mailing Address 10 CANDELA

City State Zip Code
 IRVINE CA 92620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP INFO TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366351438

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MR. THOMAS GIBBONS

Mailing Address 45137 BIG CANYON ST

City State Zip Code
 INDIO CA 92201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP TAX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366361438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MS. PAM M HAUK

Mailing Address 88 CALLE DE FELICIDAD

City State Zip Code
 RCHO STA MARGARITA CA 92688

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
M MARKETING DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366381438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. MARY M HAWKINS
Mailing Address 6182 S 177TH ST

City State Zip Code
OMAHA NE 68135

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP NEB OPS CENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366391438

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. JAMES KARAFI
Mailing Address 182 STANHOPE RD

City State Zip Code
SPARTA NJ 07871

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366401438

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. MARK A KARPE
Mailing Address 16 AUTUMNLEAF

City State Zip Code
IRVINE CA 92614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIR COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366411438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. GREGORY L KEELING

Mailing Address 406 1/2 HELIOTROPE AVE

City State Zip Code
 CORONA DEL MAR CA 92625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366421438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. MICHAEL S NOZAKI

Mailing Address 24441 CASWELL CT

City State Zip Code
 LAGUNA NIGUEL CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP INFO SECURITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366431438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH W KRUM

Mailing Address 43 LEMANS

City State Zip Code
 NEWPORT COAST CA 92657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP STRATEGIC PRGMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366441438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. DARCY L LEWIS
Mailing Address 7322 RESIDENCIA

City State Zip Code
NEWPORT BEACH CA 92660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP CREDIT ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366451438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. STEPHAN P MITCHELL
Mailing Address 18111 THEODORA DR

City State Zip Code
TUSTIN CA 92780

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR PROD & COMPETITION ANA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366461438

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. TERRY R PERKINS
Mailing Address 25522 SAWMILL LN

City State Zip Code
LAKE FOREST CA 92630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP ADVANCE DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366471438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 92

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. CHAD A ROSS
Mailing Address 851 VIA BARQUERO

City State Zip Code
SAN MARCOS CA 92069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
KEY ACCOUNT SUPR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366491438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. DAVID K ROSUCK
Mailing Address 20 SAINT JOHN DR

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FIELD VICE PRES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366501438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. CARRIE A SALVINO
Mailing Address 2394 WESTMINSTER AVE

City State Zip Code
COSTA MESA CA 92627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366511438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. PATRICIA A SANDBERG

Mailing Address 400 FLINT AVE

City State Zip Code
LONG BEACH CA 90814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP INVEST CNSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366521438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. ELIZABETH H SKINNER

Mailing Address 57 CORAL LK

City State Zip Code
IRVINE CA 92614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP TECHNOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366551438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. CHERYL L TOBIN

Mailing Address 24426 PEACOCK ST

City State Zip Code
LAKE FOREST CA 92630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP INS CNSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366571438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER E ULRICH

Mailing Address 152 TROFELLO LN

City State Zip Code
 ALISO VIEJO CA 92656

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific LifeOccupation
INTRNL WHLSLR SUPR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
 . . / . . /

Transaction ID: PR10366581438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. KYLE R WOODDELL

Mailing Address 2500 CHRISTOPHER OAKS CT

City State Zip Code
 SAINT LOUIS MO 63129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific LifeOccupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

M M / D D / Y Y Y Y Y
 . . / . . /

Transaction ID: PR10366591438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. CATHLEEN H PULFORD

Mailing Address 33742 PEQUITO DR

City State Zip Code
 DANA POINT CA 92629

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific LifeOccupation
REG RPTG & ANA CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
 . . / . . /

Transaction ID: PR10366611438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. DENNIS L BAHLMANN

Mailing Address 6052 MEADOW VIEW CT

City State Zip Code
 JOHNSTON IA 50131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP NEW BUSINESS SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366621438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. KEVIN W BERWALD

Mailing Address 17601 PARKE LN

City State Zip Code
 GROSSE ILE MI 48138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366631438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. GEORGE A PAULIK

Mailing Address 2990 WINDSTONE CIR

City State Zip Code
 MARIETTA GA 30062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FVP FIELD WHOLESALING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366651438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. JEFF J BRADSHAW

Mailing Address 27302 MONDANO DR

City State Zip Code
MISSION VIEJO CA 92692

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP BUSINESS DEV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366671438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. DEBORAH K JOHNSON

Mailing Address 3019 SAN ANSELIN AVE

City State Zip Code
LONG BEACH CA 90808

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SYSTEMS ANALYSIS SUPR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366681438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MS. KAREN M BROWN

Mailing Address 11 FOREST HILLS CT

City State Zip Code
DANA POINT CA 92629

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP MODEL OFC ANN TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366691438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) MR. KENNETH W COX Mailing Address 570 EBBECREEK DR APT P City State Zip Code CORONA CA 92880 FEC ID number of contributing federal political committee. C Name of Employer Pacific Life Occupation APPLIC DEV CONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR10366701438 Amount of Each Receipt this Period 50.00 P/R Deduction (\$50.00 Monthly)
B. Full Name (Last, First, Middle Initial) MR. STEVEN R ELDER Mailing Address 37936 19TH AVE S City State Zip Code FEDERAL WAY WA 98003 FEC ID number of contributing federal political committee. C Name of Employer Pacific Life Occupation SR WHOLESALER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR10366721438 Amount of Each Receipt this Period 50.00 P/R Deduction (\$50.00 Monthly)
C. Full Name (Last, First, Middle Initial) MR. STEPHEN K ENG Mailing Address 2311 BAYPOINTE DR City State Zip Code NEWPORT BEACH CA 92660 FEC ID number of contributing federal political committee. C Name of Employer Pacific Life Occupation ALM CONSULTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR10366731438 Amount of Each Receipt this Period 40.00 P/R Deduction (\$40.00 Monthly)
SUBTOTAL of Receipts This Page (optional) ▶			140.00
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. ROBERT GOLDSTONE

Mailing Address 6556 MORNINGSIDE DR

City State Zip Code
HUNTINGTON BEACH CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP CHIEF MED OFCR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366741438

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. CHARLENE A GRANT

Mailing Address 3311 SEAVIEW AVE

City State Zip Code
CORONA DEL MAR CA 92625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP VAR REG COMPL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366751438

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. DAVID C HONERKAMP

Mailing Address 2712 LIGHTHOUSE LN

City State Zip Code
CORONA DEL MAR CA 92625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP RE ACQUISITIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366761438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

MR. JEFF A JOLLEY

Mailing Address 54 ASHBROOK

City State Zip Code
 IRVINE CA 92604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP AMF CHIEF ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366771438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)

MS. KRISTINA L KENNEDY

Mailing Address 6 CAMARIN ST

City State Zip Code
 FOOTHILL RANCH CA 92610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP IMD ACTUARIAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366781438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)

MS. LINDA L KOTOWICZ

Mailing Address 795 TREPHANNY LN

City State Zip Code
 WAYNE PA 19087

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FVP M MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366791438

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. ROBERT C O'BRIEN

Mailing Address 35 HERITAGE AVE

City State Zip Code
ASHLAND MA 01721

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366811438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. SHARON E PACHECO

Mailing Address 21611 BLUEJAY ST

City State Zip Code
TRABUCO CANYON CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
VP CHIEF COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366821438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM K VINSON

Mailing Address 2111 OWENS DRIVE

City State Zip Code
FULLERTON CA 92833

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
ACTUARIAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366871438

Amount of Each Receipt this Period

24.00

P/R Deduction (\$24.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

114.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. JEFFREY R WILT
Mailing Address 1 BAILEY DRIVE

City State Zip Code
GLENWOOD NJ 07418

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FIELD VICE PRES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366881438

Amount of Each Receipt this Period

55.00

P/R Deduction (\$55.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. STUART A HOLLAND
Mailing Address 4931 CAREFREE TRAIL

City State Zip Code
PARKER CO 80134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FVP FIELD WHOLESALING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366911438

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. BRANDON J CAGE
Mailing Address 19211 HIGHLAND VIEW LN

City State Zip Code
PORTOLA HILLS CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
ATTORNEY CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366951438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. PETER S DEERING

Mailing Address 3314 HILL ST

City State Zip Code
 SAN DIEGO CA 92106

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR VP PSD STRATEGC GRWTH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366961438

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. MARK E FANE

Mailing Address 16373 CANON LN

City State Zip Code
 CHINO HILLS CA 91709

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR INTERNAL WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366971438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. LARRY D GARDNER

Mailing Address 214 S 202ND ST

City State Zip Code
 ELKHORN NE 68022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
COMPLIANCE MANAGER, NE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10366991438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. ADRIANNE M GEORGANTAS
Mailing Address 28373 BOULDER DR

City State Zip Code
TRABUCO CANYON CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR FLD SVCS PROJ ANA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10367001438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. DAVID L GOLDSTEIN
Mailing Address 12324 CANTURA ST

City State Zip Code
STUDIO CITY CA 91604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
FVP COLI UNIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10367011438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. CHIN H KIM
Mailing Address 24 TAOS

City State Zip Code
RCHO STA MARGARITA CA 92688

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIR ADVD MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10367021438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. WAYNE K LEE
Mailing Address 9827 E LEMON AVE

City State Zip Code
ARCADIA CA 91007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DATABASE MGMT CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10367041438

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MS. RACHELLE E REGEHR
Mailing Address 20822 CATAMARAN LN

City State Zip Code
HUNTINGTON BEACH CA 92646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
INTERNAL WHOLESALER I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10367071438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. JAMES M RUGGERIO
Mailing Address 449 SAINT ANNES DR

City State Zip Code
BIRMINGHAM AL 35244

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10367081438

Amount of Each Receipt this Period

65.00

P/R Deduction (\$65.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. RONALD C SEXTON

Mailing Address 2553 W GLENCREST AVE

City State Zip Code
ANAHEIM CA 92801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SYSTEMS ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10367091438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. KEITH C WERSCHKE

Mailing Address 25252 NORTHRUP DR

City State Zip Code
LAGUNA HILLS CA 92653

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP ACTUARIAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10367121438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. JIM Y CHU

Mailing Address 120 ALBERT PL APT 10

City State Zip Code
COSTA MESA CA 92627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP PROD DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10367141438

Amount of Each Receipt this Period

65.00

P/R Deduction (\$65.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ROBERT J HUNT

Mailing Address 20130 NE 28TH PL

City State Zip Code
 SAMMAMISH WA 98074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10367161438

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. STEVEN H GOLDBERG

Mailing Address 18 THREE VINES CT

City State Zip Code
 LADERA RANCH CA 92694

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
DIR ANNUITIES PRODUCT DEVELOPM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10367181438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JASON T TODD

Mailing Address 59 LAURELHURST DR

City State Zip Code
 LADERA RANCH CA 92694

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
CREDIT ANALYSIS MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10371991438

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. ROBERT J AVELLINO
Mailing Address 3 PHEASANT DR.

City State Zip Code
MT. LAUREL NJ 08054

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10614781438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN K BEST
Mailing Address 445 FLINT AVE

City State Zip Code
LONG BEACH CA 90814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10614791438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. CARL B JACKSON
Mailing Address 22395 WOODGROVE RD

City State Zip Code
LAKE FOREST CA 92630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
BUS CONT PRGM DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10614811438

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. CARLETON J MUENCH

Mailing Address 510 SAN NICHOLAS CT

City State Zip Code
LAGUNA BEACH CA 92651

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP INVESTMENT OVERSIGHT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10614831438

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. PATRICK J O'BRIEN

Mailing Address 1112 LAS POSAS

City State Zip Code
SAN CLEMENTE CA 92673

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP SPECIALIZED MRKTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10614841438

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. ALEX M RUIZ

Mailing Address PO BOX 7312

City State Zip Code
NEWPORT BEACH CA 92658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
ACTUARIAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10614861438

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. TIM N SHAHEEN

Mailing Address 28 STONE PNE

City State Zip Code
ALISO VIEJO CA 92656

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
AVP MARKETING OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10614871438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MR. MATTHEW WELLS

Mailing Address 120 BONITA DR

City State Zip Code
HOMEWOOD AL 35209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10614921438

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MR. JAMES P LEASURE

Mailing Address 2427 PORT WHITBY PL

City State Zip Code
NEWPORT BEACH CA 92660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
SR MANAGING DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR10668011438

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. DAVID J VAN DE WATER

Mailing Address 2062 MOUNT SHASTA DR

City State Zip Code
 SAN PEDRO CA 90732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation
MARKETING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y

Transaction ID: PR11106891438

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

16617.65

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Campbell for Congress

Mailing Address 4590 MacArthur Blvd., Suite 500

City
Newport Beach

State
CA

Zip Code
92660

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
John Campbell

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 48

Transaction ID: 4953897

Date of Disbursement

11 / 26 / 2007

Amount of Each Disbursement this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Tim Johnson for South Dakota, Inc.

Mailing Address 420 C Street, NE
Lower Level

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Tim Johnson

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: SD District:

Transaction ID: 4958286

Date of Disbursement

11 / 29 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mike Thompson for Congress

Mailing Address 236 Massachusetts Avenue, NE
Suite 508

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Mike Thompson

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 1

Transaction ID: 4958284

Date of Disbursement

11 / 29 / 2007

Amount of Each Disbursement this Period

3500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Thompson for Congress

Mailing Address 236 Massachusetts Avenue, NE
Suite 508

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name
Mike Thompson

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 1

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 4958285

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

6500.00